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FE5AN018

FORM 3

REPORT OF RECEIPTS

For An Authorized Committee

11.

				141112	mce, use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT		Example: If typing, typover the lines.	pe 12FE4M5	Ti- 7. 0.2
Friends of Mary Land	rieu, Inc.				1
<u> </u>					
ADDRESS (number and street) 700 13th Street		NW			
ADDNESS (Inditibel and sileet)	Suite 600				
Check if different than previously	Washington DC 20005 -				
reported. (ACC) 2. FEC IDENTIFICATION N	HIMPED W	CITY A		STATE A	ZIP CODE
E HTT: VENING N	.1			OIAIL	STATE ▼ DISTRICT
C C00325126		3. IS THIS REPORT	(N) O	R (A)	
4. TYPE OF REPORT (C	hoose One)	(b) 12-Day PI	RE-Election Report fo	r the:	
(a) Quarterly Reports:		•==	Primary (12P)	General (120	G) Runoff (12R)
April 15 Quarterly Report (Q1)				्रु General (120	a) Aution (12h)
July 15 Quarterly	Report (Q2)	<u></u>	Convention (12C)	Special (128	5)
Coctober 15 Quart		Election of	m M// [b		in the State of
January 31 Year-End Report (YE)		(c) 30-Day POST-Election Report for the:			
			General (30G)	Runoff (30R)	Special (30S)
Termination Repo	rt (TER)	Election	(1)	iyr Cyv n <u>mana mai</u>	in the A State of Ca
	08 03	2014 2014	through	м м в в в в в в в в в в в в в в в в в в	2014
I certify that I have examined		the best of my	knowledge and belief	f it is true, correct and o	complete.
Type or Print Name of Treasur	er Nancy Marsigli	a	*		
Signature of Treasurer Na	ncy Marsiglia	may 2	n - C	Date 10	15 2014
NOTE: Submission of false, erro	neous, or incomplet	e information ma	sy subject the person	signing this Report to the	penalties of 2 U.S.C. §437g.
Office Use					FEC FORM 3